PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10045850

| (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | OTHER THAN OR SMALL ENTITY | | |
|---|--------------------|---|----------------|---------------------------|------------------------------|------------------|---------|---------------------|------------------------|----------------------------|---------------------|------------------------|
| TOTAL CLAIMS | | | 25 | | | | | RATE | FEE | I | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| TOTAL CHARGEABLE CLAIMS | | | 25 minus 20= | | * 5 | | | X\$ 9= | | OR | X\$18= | 90 |
| INDEPENDENT CLAIMS | | | / minus 3 = | | * 3 | | | X42= | | OR | X84= | 252 |
| MU | LTIPLE DEPEN | DENT CLAIM PI | RESENT | | | | | +140= | | OR | +280= | a sh |
| * If | the difference | in column 1 is | less than ze | ro, enter "0" in column 2 | | | | TOTAL | | OR | TOTAL | 1082 |
| CLAIMS AS AMENDED - PART II | | | | | | | | | - | 10,, | OTHER | |
| | | (Column 1) | | (Colu | | | | SMALL E | ENTITY | OR | SMALL | NTITY |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | PREVI | IBER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | : | RATE | ADDI- TIONAL FEE |
| | Total | · 20 | Minus | ** | 25 | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * 4 | Minus | *** | 6 | ["] | H | X42= | | OR | X84= | |
| | FIRST PRESE | NIATION OF MI | JLIPLE DEF | PENUEN | CLAIM | | ' | +140= | | OR | +280= | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | HEST MBER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | · 20 | Minus | ** (| 25 | = | \prod | X\$ 9= | | OR | X\$18= | |
| | Independent | * 4/ | Minus | *** | T CI AINA | = | Ħ | X42= | _ | OR | X84= | |
| L_ | FIRST PRESE | NTATION OF M | JETIPLE DEF | ENDEN | CLAIM | | ┙┃ | +140= | | OR | +280= | |
| | | | | | | | | TOTAL ADDIT, FEE | | OR | TOTAL ADDIT, FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | HEST MBER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ## | | = | | X\$ 9= | : | OR | X\$18= | |
| | Independent | AUTATION OF M | Minus | *** | T CL ADZ | | ┨╏ | X42= | | OR | X84= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +140= | | OR | +280= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE | | | | | | | | | | OB | TOTAL ADDIT. FEE | |
| *** | If the "Highest Nu | mber Previously Pa ber Previously Pa | aid For IN THI | S SPACE | is less tha | n 3, enter "3." | | | ropriate box | 1 | | |